

CLAIMS ONLY

Application Number

10 697321

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend			
1									
2									
3		1							
4		1							
5		1							
6		1							
7		1							
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45		1							
46		1							
47		1							
48		1							
49		1							
50		1							
Total Indep	3								
Total Depend	29								
Total Claims	32								

1
33